

DVBE Utilization Report

Instructions to Contractor:

Contract Number:

Submit a fully completed certification to the funding DHCS Program within 60 days following receipt of final payment under the contract. An extension up to 30 calendar days may be requested in writing to the funding DHCS Program.

Submit one (1) original and one (1) copy. The original is to bear an original signature of a person authorized to bind the Contractor. The additional copy may bear a photocopied signature. Submit as many sheets as are necessary to report actual DVBE use.

Contracting Entity Claiming DVBE Use	Total Amount Received by Contracting Entity
	\$
DVBE Subcontractor Utilization Information	
Name: Address: Amount Received: \$	Name: Address: Amount Received: \$
Name: Address: Amount Received: \$	Name: Address: Amount Received: \$
Name: Address: Amount Received: \$	Name: Address: Amount Received: \$
Name: Address: Amount Received: \$	Name: Address: Amount Received: \$

DVBE Utilization Certification

1. The contracting entity named herein certifies that all payments under the contract have been made to the DVBEs named herein.
2. The actual percentage of DVBE participation claimed prior to contract award was achieved.

A person or entity that knowingly provides false information shall be subject to a civil penalty for each violation. (M&VC 999.5)

Contractor's Name (as on contract): _____

Signature of Contractor or Official Designee: _____ Date: _____

Printed Name/Title of Person Signing: _____